

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

GOOD FUND, THE

ADDRESS (number and street)

PO BOX 3404

☐ Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22302

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00409185

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2013

through

M M M / D D D / Y Y Y Y Y Y  
07 31 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Laura McMenamin

Signature of Treasurer

Laura McMenamin

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
08 13 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

GOOD FUND, THE

Report Covering the Period:

From:

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 07  |   | 01  |   | 2013      |

To:

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 07  |   | 31  |   | 2013      |

|  | COLUMN A<br>This Period                                | COLUMN B<br>Calendar Year-to-Date |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
|--|--|-----------------------------------|---|---|---|------|--|-----------|--|--|--|---|----------|--|--|--|--|
| 6. (a) Cash on Hand<br>January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2013</td></tr></table> | Y  | Y                                 | Y | Y | Y | 2013 |  |           |  |  |  | <table><tr><td colspan="5">52951.95</td></tr></table> | 52951.95 |  |  |  |  |
| Y  | Y  | Y                                 | Y | Y |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 2013   |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 52951.95   |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <table><tr><td colspan="5">185114.85</td></tr></table> | 185114.85                         |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 185114.85  |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| (c) Total Receipts (from Line 19) .....  | <table><tr><td colspan="5">84500.00</td></tr></table>  | 84500.00                          |   |   |   |      | <table><tr><td colspan="5">247500.00</td></tr></table> | 247500.00 |  |  |  |   |          |  |  |  |  |
| 84500.00   |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 247500.00  |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....  | <table><tr><td colspan="5">269614.85</td></tr></table> | 269614.85                         |   |   |   |      | <table><tr><td colspan="5">300451.95</td></tr></table> | 300451.95 |  |  |  |   |          |  |  |  |  |
| 269614.85  |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 300451.95  |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 7. Total Disbursements (from Line 31).....   | <table><tr><td colspan="5">48041.94</td></tr></table>  | 48041.94                          |   |   |   |      | <table><tr><td colspan="5">78879.04</td></tr></table>  | 78879.04  |  |  |  |   |          |  |  |  |  |
| 48041.94   |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 78879.04   |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....  | <table><tr><td colspan="5">221572.91</td></tr></table> | 221572.91                         |   |   |   |      | <table><tr><td colspan="5">221572.91</td></tr></table> | 221572.91 |  |  |  |   |          |  |  |  |  |
| 221572.91  |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 221572.91  |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....                                | <table><tr><td colspan="5">0.00</td></tr></table>      | 0.00                              |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 0.00   |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....                               | <table><tr><td colspan="5">0.00</td></tr></table>      | 0.00                              |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 0.00   |  |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

GOOD FUND, THE

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 07 / 01 / 2013

To:

 M M / D D / Y Y Y Y Y  
 07 / 31 / 2013
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

13500.00

32500.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

13500.00

32500.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

71000.00

215000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

84500.00

247500.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

84500.00

247500.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

84500.00

247500.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 32791.94                      | 40629.04                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 32791.94                      | 40629.04                          |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 250.00                        | 9250.00                           |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements .....  | 15000.00                      | 29000.00                          |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 48041.94                      | 78879.04                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 48041.94                      | 78879.04                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 84500.00                      | 247500.00                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 84500.00                      | 247500.00                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 32791.94                      | 40629.04                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 32791.94                      | 40629.04                          |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 21  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

Full Name (Last, First, Middle Initial)

**A. Kara Calvert**

Mailing Address 241 Warren St NE

City State Zip Code  
 Washington DC 20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Franklin Square Group Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 31 2013

**Transaction ID : 1867**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. H. Benson Dendy**

Mailing Address 1142 West Avenue

City State Zip Code  
 Richmond VA 23220

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Vectre Corporation Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 31 2013

**Transaction ID : 1851**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**c. Christopher Giblin**

Mailing Address 1304 Chancel Place

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Ogilvy Government Relations Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 31 2013

**Transaction ID : 1852**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

Full Name (Last, First, Middle Initial)

## **A. Joseph H. Gibson**

Mailing Address 5040 Glenbrook Terrace, N. W.

City State Zip Code  
Washington DC 20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Gibson Group

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

**Transaction ID : 1843**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Mitch Glazier**

Mailing Address 7313 Durbin Terrace

City State Zip Code  
Bethesda MD 20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REcording Industry Association

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

**Transaction ID : 1860**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

## **C. Ralph Hellmann**

Mailing Address 3310 Old Dominion Blvd

City State Zip Code  
Alexandria VA 22305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lugar Hellmann Group

Occupation

Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

**Transaction ID : 1842**

Amount of Each Receipt this Period

3000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

Full Name (Last, First, Middle Initial)

## **A. Timothy Kuebler**

Mailing Address 1855 Colonial Drive

City

Coral Springs

State

FL

Zip Code

33071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Titan America LLC

Occupation

Chief Government Affaris Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

**Transaction ID : 1865**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Bernard R Okun**

Mailing Address 6612 Maugh Rd

City

Mclean

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The O Team

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

**Transaction ID : 1840**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

1500.00

**TOTAL** This Period (last page this line number only)..... ►

13500.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 21

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

Full Name (Last, First, Middle Initial)

## **A. ALTRIA GROUP INC. POLITICAL ACTION COMMITTEE**

Mailing Address 101 Constitution Avenue NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00089136

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**07** / **31** / **2013**

**Transaction ID : 1868**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 325 Seventh Street NW  
Suite 700

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00106146

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**07** / **19** / **2013**

**Transaction ID : 1846**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)**

Mailing Address 208 S. AKARD STREET  
SUITE 2701

City State Zip Code  
DALLAS TX 75202

FEC ID number of contributing  
federal political committee.

**C** C00109017

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**07** / **31** / **2013**

**Transaction ID : 1857**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 21

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

**A.** Full Name (Last, First, Middle Initial)  
**BABCOCK & WILCOX COMPANY POLITICAL ACTION COMMITTEE (B&W PAC), THE**

Mailing Address 2016 Mt. Athos Road

City State Zip Code  
 Lynchburg VA 24504

FEC ID number of contributing  
federal political committee.

**C** C00365502

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 31 2013

**Transaction ID : 1862**

Amount of Each Receipt this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
**BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILD PAC)**

Mailing Address 1201 15TH STREET, NW

City State Zip Code  
 WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00000901

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 31 2013

**Transaction ID : 1856**

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
**CBS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 601 PENNSYLVANIA AVE NW  
 SUITE 540

City State Zip Code  
 WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00423442

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 07 19 2013

**Transaction ID : 1845**

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

12000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 21

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

Full Name (Last, First, Middle Initial)

## **A. EVERY REPUBLICAN IS CRUCIAL (ERICPAC)**

Mailing Address 25 East Main Street, Suite 200

City State Zip Code  
 Richmond VA 23219

FEC ID number of contributing  
federal political committee.

**C** C00384701

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**07** / **31** / **2013**

**Transaction ID : 1858**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. GENWORTH FINANCIAL INC POLITICAL ACTION COMMITTEE**

Mailing Address 6620 W. BROAD STREET

City State Zip Code  
 RICHMOND VA 23230

FEC ID number of contributing  
federal political committee.

**C** C00404194

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

**07** / **31** / **2013**

**Transaction ID : 1849**

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

## **C. GOOGLE INC. NETPAC**

Mailing Address 1101 NEW YORK AVENUE, NW  
 SECOND FLOOR

City State Zip Code  
 WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00428623

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**07** / **31** / **2013**

**Transaction ID : 1859**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

13000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 21

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

**A.** Full Name (Last, First, Middle Initial)  
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP)

Mailing Address 412 FIRST STREET, SE, SUITE 300

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00022343

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

**07** / **31** / **2013**

**Transaction ID : 1855**

Amount of Each Receipt this Period

3000.00

**B.** Full Name (Last, First, Middle Initial)  
**K & L GATES LLP POLITICAL ACTION COMMITTEE (NC)**

Mailing Address POST OFFICE BOX 17047

City State Zip Code  
RALEIGH NC 27619

FEC ID number of contributing  
federal political committee.

**C** C00395970

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

**07** / **31** / **2013**

**Transaction ID : 1853**

Amount of Each Receipt this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
**KELLEY DRYE & WARREN POLITICAL ACTION COMMITTEE**

Mailing Address 3050 K STREET NW SUITE 400

City State Zip Code  
WASHINGTON DC 20007

FEC ID number of contributing  
federal political committee.

**C** C00301929

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**07** / **19** / **2013**

**Transaction ID : 1841**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 21

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

**A.** Full Name (Last, First, Middle Initial)  
MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)

Mailing Address P.O. BOX 75000  
MC2250

City State Zip Code  
DETROIT MI 48275

FEC ID number of contributing  
federal political committee.

**C** C00496307

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y  
07 31 2013

**Transaction ID : 1850**

Amount of Each Receipt this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M STREET, NW  
SUITE 540

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00130773

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y  
07 31 2013

**Transaction ID : 1848**

Amount of Each Receipt this Period

3000.00

**C.** Full Name (Last, First, Middle Initial)  
NICKLES GROUP PAC

Mailing Address 601 THIRTEENTH ST NW  
SUITE 250 NORTH

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00115972

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y  
07 31 2013

**Transaction ID : 1854**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

9000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 21

(check only one)

|                              |                              |   |                             |                             |                             |                             |                             |                             |
|------------------------------|------------------------------|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

GOOD FUND, THE

Full Name (Last, First, Middle Initial)

**A. Recording Industry Assn. of America**

Mailing Address 1025 F Street  
10th Floor

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

C C00009357

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 31    | / | 2013        |

Transaction ID : 1861

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. SOUTHEAST MILK, INC. POLITICAL ACTION COMMITTEE**

Mailing Address POST OFFICE BOX 3790

City State Zip Code  
BELLEVIEW FL 34421

FEC ID number of contributing  
federal political committee.

C C00359984

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 19    | / | 2013        |

Transaction ID : 1844

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. TIME WARNER CABLE INC. FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 901 F STREET, NW  
SUITE 800

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

C C00431551

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 31    | / | 2013        |

Transaction ID : 1847

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 21

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

Full Name (Last, First, Middle Initial)

## **A. TIPPERARY HILL PAC**

Mailing Address 228 S Washington St  
Suite 115

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00225623

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**07** / **31** / **2013**

**Transaction ID : 1866**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC**

Mailing Address 9800 FREDERICKSBURG ROAD

City State Zip Code  
SAN ANTONIO TX 78288

FEC ID number of contributing  
federal political committee.

**C** C00164145

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**07** / **31** / **2013**

**Transaction ID : 1863**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. VIACOM INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1501 M STREET  
SUITE 1100

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00167759

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**07** / **31** / **2013**

**Transaction ID : 1864**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

8500.00

**TOTAL** This Period (last page this line number only)..... ►

71000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 21

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

Full Name (Last, First, Middle Initial)

**A. Design Marketing**

Mailing Address 6742 Thirlane Road

City Roanoke      State VA      Zip Code 24019

Purpose of Disbursement  
Event gifts

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      24      2013
**Transaction ID : 1825**

Amount of Each Disbursement this Period

6576.14

Full Name (Last, First, Middle Initial)

**B. Digital Image Printing**

Mailing Address 1615 Roanoke Rd

City Daleville      State VA      Zip Code 24083

Purpose of Disbursement  
Printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      23      2013
**Transaction ID : 1826**

Amount of Each Disbursement this Period

1072.54

Full Name (Last, First, Middle Initial)

**C. Randy Hinaman**

Mailing Address 703 Day Ln

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement  
Consultant:Political

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      25      2013
**Transaction ID : 1827**

Amount of Each Disbursement this Period

6000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13648.68



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 21

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

Full Name (Last, First, Middle Initial)

**A. Randy Hinaman**

Mailing Address 703 Day Ln

City

Alexandria

State

VA

Zip Code

22314

Purpose of Disbursement

Travel expense reimbursement

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M M M /  
07D D D /  
29Y Y Y Y Y Y  
2013**Transaction ID : 1838**

Amount of Each Disbursement this Period

294.59

Full Name (Last, First, Middle Initial)

**B. Randy Hinaman**

Mailing Address 703 Day Ln

City

Alexandria

State

VA

Zip Code

22314

Purpose of Disbursement

Consultant:Political

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M M M /  
07D D D /  
31Y Y Y Y Y Y  
2013**Transaction ID : 1828**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Laura Bell Consulting**

Mailing Address 4618 Latrobe Place

City

Alexandria

State

VA

Zip Code

22311

Purpose of Disbursement

Solicitation and Fundraising Expenses

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M M M /  
07D D D /  
01Y Y Y Y Y Y  
2013**Transaction ID : 1829**

Amount of Each Disbursement this Period

4000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5794.59

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22  | <input type="checkbox"/> | 23  | <input type="checkbox"/> | 24  | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26  |
| <input type="checkbox"/>            | 27  | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

## GOOD FUND, THE

### A. Laura Bell Consulting

Mailing Address 4618 Latrobe Place

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Alexandria | VA    | 22311    |

| Purpose of Disbursement | Solicitation and Fundraising Expenses |
|-------------------------|---------------------------------------|
|                         |                                       |

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : 1830

Amount of Each Disbursement this Period

474.35

Full Name (Last, First, Middle Initial)

### B. Laura Bell Consulting

Mailing Address 4618 Latrobe Place

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Alexandria | VA    | 22311    |

|                         |                         |
|-------------------------|-------------------------|
| Purpose of Disbursement | Consultant: Fundraising |
|-------------------------|-------------------------|

| Candidate Name | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9  | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99  | 100 |
|----------------|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-----|-----|
| 1              | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 |     |

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

State:  District:

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

Date of Disbursement

07 / 25 / 2013

Transaction ID : 1831

Amount of Each Disbursement this Period

9000.00

Full Name (Last, First, Middle Initial)

### C. Laura Bell Consulting

Mailing Address 4618 Latrobe Place

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Alexandria | VA    | 22311    |

|                         |                         |
|-------------------------|-------------------------|
| Purpose of Disbursement | Consultant: Fundraising |
|-------------------------|-------------------------|

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

State:  District:

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

Date of Disbursement

Transaction ID : 1832

Amount of Each Disbursement this Period

3000.00

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

12474.35

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 21

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

Full Name (Last, First, Middle Initial)

## **A. Political Compliance Services**

Mailing Address PO Box 373

City State Zip Code  
 Fairfax Station VA 22039

Purpose of Disbursement  
 Consultant: Compliance

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
 07 01 2013

**Transaction ID : 1837**

Amount of Each Disbursement this Period

500.00

## **B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

## **C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

32417.62

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 21

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**GOOD FUND, THE**

Full Name (Last, First, Middle Initial)

**A. MORGAN GRIFFITH FOR CONGRESS**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 26    |   | 2013        |

Mailing Address PO BOX 361

|                |       |          |
|----------------|-------|----------|
| City           | State | Zip Code |
| CHRISTIANSBURG | VA    | 24068    |

Purpose of Disbursement

**Transaction ID : 1835**

Amount of Each Disbursement this Period

|        |
|--------|
| 250.00 |
|--------|

Candidate Name

**H MORGAN GRIFFITH**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA District: 09

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|      |       |          |

Purpose of Disbursement

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|      |       |          |

Purpose of Disbursement

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

|        |
|--------|
| 250.00 |
|--------|

**TOTAL** This Period (last page this line number only).....▶

|        |
|--------|
| 250.00 |
|--------|

|  |     |  |     |  |     |  |     |  |      |  |     |
|--|-----|--|-----|--|-----|--|-----|--|------|--|-----|
|  | 21b |  | 22  |  | 23  |  | 24  |  | 25   |  | 26  |
|  | 27  |  | 28a |  | 28b |  | 28c |  | X 29 |  | 30b |

## GOOD FUND, THE

#### A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Date of Disbursement

Transaction ID : 1836

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

15000.00

Date of Disbursement

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:  District:

Date of Disbursement

Amount of Each Disbursement this Period

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*(continued)*

Category/  
Type

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:  District:

15000.00

15000.00